PART B - FEE(S) TRANSMITTAL

AUG 1 8 7006	this form, together v		or <u>Fax</u>	P.O. Box 1450 Alexandria, Vir (571)-273-2885	ginia 22313-145		
aptromage MI further cor indicated unless corrected t maintenance fee notification	is.		orders and publication of the property of the	n of maintenance fees correspondence address	quired). Blocks 1 th will be mailed to the ss; and/or (b) indicate	rough 5 should be control of the current corresponding a separate "FEE"	ompleted where lence address as ADDRESS" for
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VOLPE AND KO DEPT. ICC UNITED PLAZA, 30 SOUTH 17TH S PHILADELPHIA,	DENIG, P.C. SUITE 1600 STREET			States Postal Service addressed to the Ma transmitted to the US	ertificate of Mailing this Fee(s) Transmitt with sufficient posta ail Stop ISSUE FEE PTO (571) 273-2885 ck Koenig	tal is being deposited age for first class mail E address above, or i, on the date indicated	(Depositor's name) (Signature)
APPLICATION NO.	FILING DATE		FIRST MALER BUILD		8/1/0-		(Date)
10/080,073	02/21/2002		Posthametim D		ATTORNEY DOCK		ATION NO.
TITLE OF INVENTION: SI		BASE STATION	Parthapratim D	98/22 91 FC 92 FC	:1594 399	=	400 10080073 -
APPLN. TYPE	SMALL ENTITY	ISSUE F	EE P	UBLICATION FEE	TOTAL FEE(S)	DUE DA DATI	E DUE
nonprovisional	onprovisional NO \$1400			\$300	\$1700	09/18	3/2006
EXAMI	NER	ART UN	IT C	LASS-SUBCLASS			
WILSON, RO		2616		370-335000			
"Fee Address" indication	ence address (or Change of	Correspondence	(1) the names of or agents OR, alte (2) the name of a registered attorne	single firm (having as a or agent) and the name attorneys or agents. If	a member a	lpe and Ko	enig, P.
3. ASSIGNEE NAME AND I PLEASE NOTE: Unless a recordation as set forth in 3 (A) NAME OF ASSIGNED InterDigital	an assignee is identified be 37 CFR 3.11. Completion of E Technology Co	low, no assignee of this form is NOT	data will appear on of a substitute for filin (B) RESIDENCE: (G) Wilmingt	he patent. If an assign g an assignment. CITY and STATE OR COON, Delawa.	COUNTRY) re		
Please check the appropriate a	ssignee category or categor	ies (will not be pri	nted on the patent):	☐ Individual 🛎 Co	orporation or other pr	rivate group entity	Government
4a. The following fee(s) are en in the same see in the same se	nclosed:	4b.	Payment of Fee(s): A check in the an Payment by credi	nount of the fee(s) is entered to card. Form PTO-2038 reby authorized by chank Number 09-043!	closed.		
5. Change in Entity Status (f			_				
☐ a. Applicant claims SM. The Director of the USPTO is			on Fee (if any) or to	longer claiming SMAI	L ENTITY status. S	ee 37 CFR 1.27(g)(2).	ahova
The Director of the USPTO is NOTE: The Issue Fee and Pub interest as shown by the record	lication Fee (if required) was of the United States Pater	ill not be accepted It and Trademark (from anyone other the Office.	an the applicant; a regis	stered attorney or age	ent; or the assignee or	other party in
Authorized Signature	u fo	7		Date	115/06		
Typed or printed name C.	. Fréderick F	Koenig II	<u>I</u>	Registration N	<u>. 29,662</u>		
This collection of information in application. Confidentiality ubmitting the completed applhis form and/or suggestions for all the form and/or suggestions for appearance in the form application applicati	ication form to the USPTO or reducing this burden, sho a 22313-1450. DO NOT S. 50.	. Time will vary of uld be sent to the END FEES OR CO	lepending upon the inchief Information Of Complete Information Of Complete Information Of Complete Information Inchience Information Inchience Information Inchience Information Inchience Inchience Information Information Inchience Information Inchience Information Inchience Information Inchience Information Inchience Information Inchience Information Informati	dividual case. Any conflicer, U.S. Patent and To THIS ADDRESS.	mments on the amou Frademark Office, U. SEND TO: Commis	including gathering, print of time you require. S. Department of Conscioner for Patents, P.C.	O to process) reparing, and to complete nmerce, P.O. D. Box 1450,

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Under the paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number Complete if Known									
RABEL pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Application Num		10/080,073	·		
FEE TRANSMITTAL						February 21, 2002			
Foi		First Named Inventor D		De et al.					
				Examiner Name		Robert W. Wilso			
Applicant claims small	entity status.	See 37 CFR 1.2	7	Art Unit		2616			
TOTAL AMOUNT OF PAY	MENT (\$)	1,712.00		Attorney Docket		I-2-0173.5US	173.5US		
METHOD OF PAYMENT	(check all	that apply)							
Check Credit (Card N	Money Order	None	Other (p	lease ide	ntify):			
X Deposit Account D	eposit Account	Number: 09-043	5	Deposit Ac	count Na	me: InterDigital Co	ommunications Corporation		
For the above-identit				•					
Charge fee(s)							except for the filing fee		
Charge any a	dditional fee(s) or underpayme	nts of fee	(s) X Credit	any ove	erpayments			
under 37 CFF WARNING: Information on this	₹ 1.16 and 1.	17		<u> </u>	•		Provide credit card		
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FEE CALCULATION (A	ll the fees	below are due ı	Jpon fili	ing or may be	subjec	t to a surcharg	e.)		
1. BASIC FILING, SEAR	FILING F	EES		CH FEES	EXAN	MINATION FEES			
Application Type	<u>S</u> Fee (\$)	mall Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee	Small Entity (\$) Fee (\$)	Fees Paid (\$)		
Utility	300	150	500	250	200				
Design	200	100	100	50	130	65	4.4511		
Plant	200	100	300	150	160	80			
Reissue	300	150	500	250	600	300			
Provisional	200	100	0	0	(0			
2. EXCESS CLAIM FEE	ES					- 4	Small Entity		
Fee Description						<u>Fee (\$)</u> 50	<u>Fee (\$)</u> 25		
Each claim over 20 (i Each independent cla			1ec)			200	100		
Multiple dependent c		including Reisse	icsj			360	180		
Total Claims		ns Fee (\$)	<u>Fee</u>	Paid (\$)		Multiple	Dependent Claims		
- =	:	_ x	_=	0		<u>Fee (\$)</u>	Fee Paid (\$)		
HP = highest number of total claims paid for, if greater than 20. Indep. Claims									
- =		_ x	_=	0					
HP = highest number of independent claims paid for, if greater than 3.									
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50									
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
<u>Total Sheets</u> <u>Extra Sheets</u> <u>Number of each additional 50 or fraction thereof</u> <u>Fee (\$)</u> <u>Fee Paid (\$)</u>									
	Non-English Specification, \$130 fee (no small entity discount)								
Other (e.g., late filing surcharge): Issue, Publication and 4 Advanced Copies									

SUBMITTED BY			
Signature	c/8h	Registration No. (Attorney/Agent) 29,662	Telephone 215-568-6400
Name (Print/Type)	C. Frederick Koenig III		Date 8/15/08

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/21 (09-04)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE are required to respond to a collection of information unless it displays a valid OMB control number. Paperwork Reduction Act of 1995, no persons Application Number 10/080,073 Filing Date **TRANSMITTAL** February 21, 2002 First Named Inventor **FORM** De et al. Art Unit 2661 **Examiner Name** Robert W. Wilson (to be used for all correspondence after initial filing) Attorney Docket Number 1-2-0175.5US Total Number of Pages in This Submission

ENCLOSURES (Check all that apply)										
X	Fee Trans	smittal Fo	rm		Drawing	g(s)				After Allowance Communication to TC
	☐ Fe	ee Attached			Licensir	ng-relate	d Papers			Appeal Communication to Board of Appeals and Interferences
Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53		Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Addres Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CD Remarks			Address	Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): PTOL-85				
			SIGNA	TURE	OF AP	PLICA	NT, ATT	ORNEY, C	R AG	ENT
Firm Name VOLPE AND KOENIG, P.C.										
Signature () X										
C. Frederick Koenig III										
Date 8/15			10-6				Reg. No.	29,6	62	
CERTIFICATE OF TRANSMISSION/MAILING										
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:										
Signature										
Typed or printed name C. Frederick Koenig III						Date 8/15/06				

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